

Attorney  
Docket No.: AK-516XX

DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**THERAPEUTIC AGENT FOR PERIODONTAL DISEASE**

The specification of which (check one):

[ ] is attached hereto [ ] was deposited on April 14, 2006 as Application No. 10/575,826; amended on April 14, 2006 (if applicable).

[X] was filed as PCT International Appl. No. PCT/JP2004/015454 on October 13, 2004, and was amended under PCT Article 19 on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, USC §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)	Date Filed	Priority Claimed		
2003-356425 (Number)	JAPAN (Country)	16 October 2003 (Day/Month/Year)	[X] Yes	[ ] No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year)	[ ] Yes	[ ] No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year)	[ ] Yes	[ ] No

I hereby claim the benefit under Title 35, USC §119(e) of any United States provisional application(s) listed below:

_____ (Application Number)	_____ (Filing Date)
_____ (Application Number)	_____ (Filing Date)
_____ (Application Number)	_____ (Filing Date)

Express Mail Number

EV 560127492 US

Attorney  
Docket No.: AK-516XX

I hereby claim the benefit under Title 35 USC §120 of any United States or International application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 USC §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application No.)	(Filing Date)	(Patented/pending/abandoned)
(Application No.)	(Filing Date)	(Patented/pending/abandoned)
(Application No.)	(Filing Date)	(Patented/pending/abandoned)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the Attorneys associated with Customer Number 00207 to prosecute this application and transact all business connected therewith in the Patent and Trademark Office, and to file with the USRO any International Application based thereon.

The following Attorneys are associated with Customer Number 00207:

Stanley M. Schurgin, Reg. No. 20,979  
Charles L. Gagnebin III, Reg. No. 25,467  
Victor B. Lebovici, Reg. No. 30,864  
Holliday C. Heine, Reg. No. 34,346

Gordon R. Moriarty, Reg. No. 38,973  
Beverly E. Hjorth, Reg. No. 32,033  
Richard E. Gamache, Reg. No. 39,196  
Thomas O. Hoover, Reg. No. 32,470

Address all correspondence to:

[X] Customer Number 00207

which is associated with the Law Firm of:  
WEINGARTEN, SCHURGIN, GAGNEBIN & LEBOVICI LLP  
Ten Post Office Square  
Boston, Massachusetts 02109  
United States  
Telephone: (617) 542-2290 Fax: (617) 451-0313

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First/Sole Inventor: Nobuji Koyama		
City of Residence Aomori	State or Country Japan	Country of Citizenship Japan
Post Office Address 4-23, Aza Sotokubo, Oaza Niida, Hachinohe-shi, Aomori 031-0813 JAPAN	City Aomori 031-0813	State /Country Zip Code JAPAN
Signature: (Please sign and date in permanent ink.)  x Nobuji Koyama		Date signed:  x 5-5,06

Full Name of Second/Joint Inventor: Shinichi Okuda											
<table border="1"> <tr> <td>City of Residence <u>Miyagi</u></td> <td>State or Country <u>Japan</u></td> <td>Country of Citizenship <u>Japan</u></td> </tr> <tr> <td>Post Office Address  2-6-12-806, Kimachidori, Aoba-ku, Sendai-shi, Miyagi 980-0801 JAPAN</td> <td>City  Miyagi 980-0801</td> <td>State /Country Zip Code  JAPAN</td> </tr> <tr> <td colspan="2">Signature: (Please sign and date in permanent ink.)  <u>x Shinichi Okude</u></td> <td>Date signed:  <u>x 5-7-06</u></td> </tr> </table>			City of Residence <u>Miyagi</u>	State or Country <u>Japan</u>	Country of Citizenship <u>Japan</u>	Post Office Address  2-6-12-806, Kimachidori, Aoba-ku, Sendai-shi, Miyagi 980-0801 JAPAN	City  Miyagi 980-0801	State /Country Zip Code  JAPAN	Signature: (Please sign and date in permanent ink.)  <u>x Shinichi Okude</u>		Date signed:  <u>x 5-7-06</u>
City of Residence <u>Miyagi</u>	State or Country <u>Japan</u>	Country of Citizenship <u>Japan</u>									
Post Office Address  2-6-12-806, Kimachidori, Aoba-ku, Sendai-shi, Miyagi 980-0801 JAPAN	City  Miyagi 980-0801	State /Country Zip Code  JAPAN									
Signature: (Please sign and date in permanent ink.)  <u>x Shinichi Okude</u>		Date signed:  <u>x 5-7-06</u>									

Full Name of Third/Joint Inventor: Koji Sasaya											
<table border="1"> <tr> <td>City of Residence <u>Kanagawa</u></td> <td>State or Country <u>Japan</u></td> <td>Country of Citizenship <u>Japan</u></td> </tr> <tr> <td>Post Office Address  c/o Chafflose Corporation, 3-11, Miyoshi-cho, Naka-ku, Yokohama-shi, Kanagawa 231-0034 JAPAN</td> <td>City  Kanagawa 231-0034</td> <td>State /Country Zip Code  JAPAN</td> </tr> <tr> <td colspan="2">Signature: (Please sign and date in permanent ink.)  <u>x</u></td> <td>Date signed:  <u>x 4-15-06</u></td> </tr> </table>			City of Residence <u>Kanagawa</u>	State or Country <u>Japan</u>	Country of Citizenship <u>Japan</u>	Post Office Address  c/o Chafflose Corporation, 3-11, Miyoshi-cho, Naka-ku, Yokohama-shi, Kanagawa 231-0034 JAPAN	City  Kanagawa 231-0034	State /Country Zip Code  JAPAN	Signature: (Please sign and date in permanent ink.)  <u>x</u>		Date signed:  <u>x 4-15-06</u>
City of Residence <u>Kanagawa</u>	State or Country <u>Japan</u>	Country of Citizenship <u>Japan</u>									
Post Office Address  c/o Chafflose Corporation, 3-11, Miyoshi-cho, Naka-ku, Yokohama-shi, Kanagawa 231-0034 JAPAN	City  Kanagawa 231-0034	State /Country Zip Code  JAPAN									
Signature: (Please sign and date in permanent ink.)  <u>x</u>		Date signed:  <u>x 4-15-06</u>									

Full Name of Fourth/Joint Inventor: Tomonaga Yoshida											
<table border="1"> <tr> <td>City of Residence <u>Aomori</u></td> <td>State or Country <u>Japan</u></td> <td>Country of Citizenship <u>Japan</u></td> </tr> <tr> <td>Post Office Address  8-8, Aza Niidamichi, Oaza Minato-machi, Hachinohe-shi, Aomori 031-0812 JAPAN</td> <td>City  Aomori 031-0812</td> <td>State /Country Zip Code  JAPAN</td> </tr> <tr> <td colspan="2">Signature: (Please sign and date in permanent ink.)  <u>x Tomonaga Yoshida</u></td> <td>Date signed:  <u>x 4-26, 06</u></td> </tr> </table>			City of Residence <u>Aomori</u>	State or Country <u>Japan</u>	Country of Citizenship <u>Japan</u>	Post Office Address  8-8, Aza Niidamichi, Oaza Minato-machi, Hachinohe-shi, Aomori 031-0812 JAPAN	City  Aomori 031-0812	State /Country Zip Code  JAPAN	Signature: (Please sign and date in permanent ink.)  <u>x Tomonaga Yoshida</u>		Date signed:  <u>x 4-26, 06</u>
City of Residence <u>Aomori</u>	State or Country <u>Japan</u>	Country of Citizenship <u>Japan</u>									
Post Office Address  8-8, Aza Niidamichi, Oaza Minato-machi, Hachinohe-shi, Aomori 031-0812 JAPAN	City  Aomori 031-0812	State /Country Zip Code  JAPAN									
Signature: (Please sign and date in permanent ink.)  <u>x Tomonaga Yoshida</u>		Date signed:  <u>x 4-26, 06</u>									